

GRAYSON & ASSOCIATES, P.C.
REQUEST FOR MEDICAL RECORDS

PATIENT NAME: _____ DOB: _____

I, _____, hereby authorize _____ @

Complete Address Phone Number Fax Number

to release to Grayson & Associates, P.C. the above named patient's Protected Health Information:

_____ all medical records

_____ the following records _____

I understand that the records described above may contain information relating to sexually transmitted disease, HIV/AIDS, notifiable diseases, alcohol and drug abuse treatment and/or mental health, and I specifically authorize the release of this information.

Patient or Personal Representative Signature: _____ Date: _____

Relationship to patient if signed by Personal Representative: _____

The Protected Health Information described above is to be released for the following purposes:

(Life Insurance, Disability, at request of patient or parent, etc.)

I understand that the information disclosed pursuant to this authorization may be subject to redisclosure by the recipient and may no longer be protected by federal or state law.

I understand that Grayson & Associates, P.C. cannot condition treatment, payment, enrollment or eligibility of benefits on the signing of this authorization. I understand that I may revoke this authorization by sending written notice to Grayson & Associates, P.C. at the address checked off below. However, I understand that any revocation will not be effective as to any action taken in reliance of the authorization prior to receipt of the written revocation.

This authorization will expire on the following date or event: _____

Patient or Personal Representative Signature: _____ Date: _____

Relationship to patient if signed by Personal Representative: _____

Please check off the appropriate Grayson & Associates, P.C. Office Location Below:

- | | | | | |
|---|---|--|---|---|
| <input type="checkbox"/> Homewood Location
2200 Lakeshore Drive
Suite #150
Birmingham, AL 35209
Phone (205) 871-6926
Fax (205) 871-7981 | <input type="checkbox"/> Riverchase Location
100 Concourse Parkway
Suite #101
Birmingham, AL 35244
Phone (205) 444-0420
Fax (205) 403-0747 | <input type="checkbox"/> Trussville Location
3504 Vann Road
Suite #100
Birmingham, AL 35235
Phone (205) 655-0585
Fax (205) 655-0586 | <input type="checkbox"/> Meadowbrook Location
1200 Corporate Drive
Suite #125
Birmingham, AL 35242
Phone (205) 329-7992
Fax (205) 329-7999 | <input type="checkbox"/> Park Plaza
2204 Lakeshore Drive
Suite #440
Birmingham, AL 35209
Phone (205) 874-7844
Fax (205) 874-7848 |
| <input type="checkbox"/> Montgomery Location
4371 Narrow Lane Rd
Suite #205
Montgomery, AL 36116
Phone (334) 323-3307
Fax (334) 323-3315 | <input type="checkbox"/> Anniston Location
801 Noble St
Suite #400
Anniston, AL 36201
Phone (256) 770-4083
Fax (256) 405-4997 | <input type="checkbox"/> Galleria Location
3000 Riverchase Galleria
Suite #500
Birmingham, AL 35244
Phone (205) 994-8811
Fax (205) 994-8812 | | |